

Permit #:	17-0097
Date:	5-4-17
Amount Paid:	450. - 4-10-17
Refund:	

Permit #:	17-0097
Date:	5-4-17
Amount Paid:	450. - 4-10-17
Refund:	

Existing Structure: (if permit being applied for is relevant to it)	Length: 59' 1/2'	Width: 26'	Height: 13' 1/2'
Proposed Construction:	Length:	Width:	Height:

SPECIALTIAL COUNCIL

FAILURE TO OBTAIN A PERMIT OR STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES

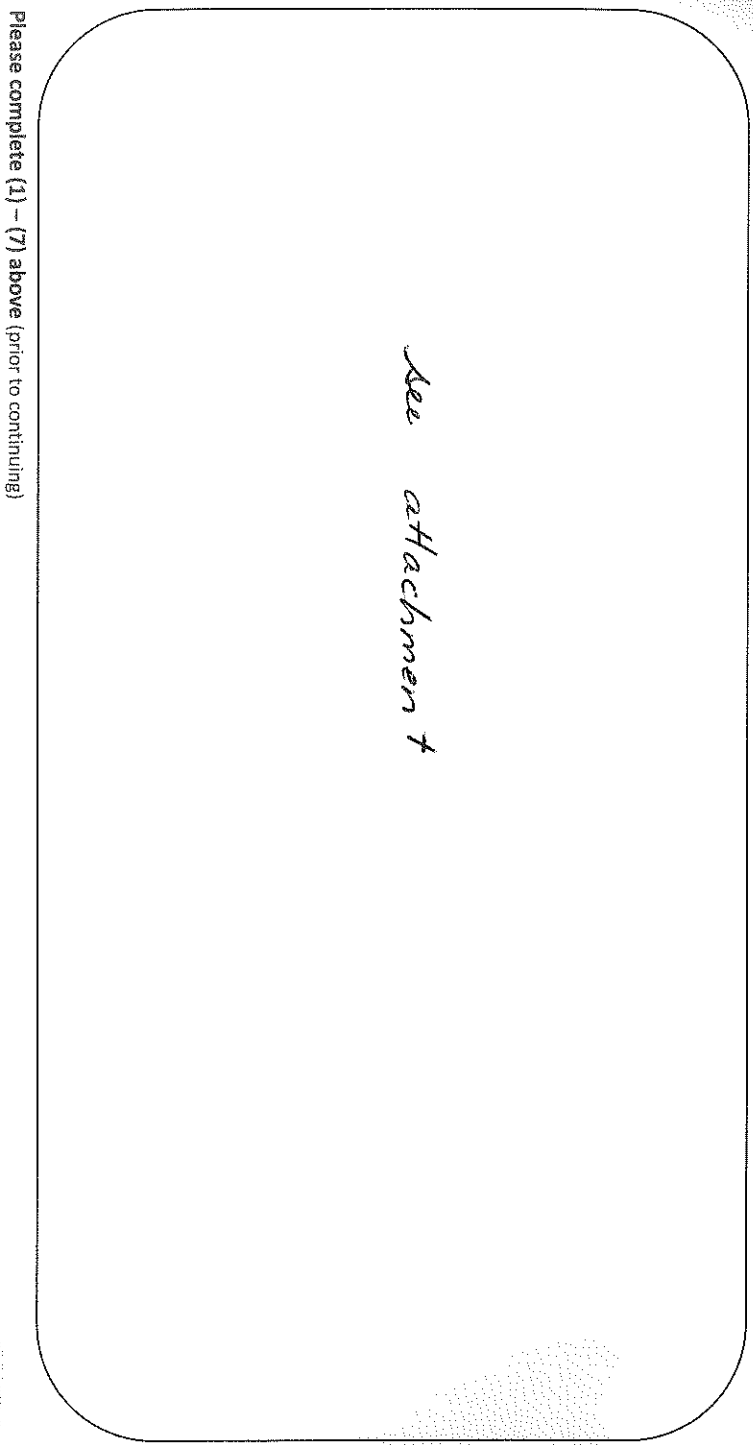
I (we) declare that this application (including any accompanying information) has been examined by me (us) and to the best of my (our) knowledge and belief it is true, correct and complete. I (we) acknowledge that I (we) am (are) responsible for the detail and accuracy of all information I (we) am (are) providing and that it will be relied upon by **Bayfield County** in determining whether to issue a permit. I (we) further accept liability which may be a result of **Bayfield County** relying on this information. I (we) am (are) providing in or with this application, I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Attach
Copy of Tax Statement
Property send your Recorded Deed

Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: Proposed Construction
- (2) Show / Indicate: North (N) on Plot Plan
- (3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road)
- (4) Show: All Existing Structures on your Property
- (5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P)
- (6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond
- (7) Show any (*): (*) Wetlands; or (*) Slopes over 20%

See Attachment



Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	162 Feet	Setback from the Lake (ordinary high-water mark)	NA Feet
Setback from the Established Right-of-Way	149 Feet	Setback from the River, Stream, Creek	NA Feet
Setback from the North Lot Line	100 Feet	Setback from the Bank or Bluff	NA Feet
Setback from the South Lot Line	220 Feet	Setback from Wetland	NA Feet
Setback from the West Lot Line	Road 476 Feet	20% Slope Area on property	Yes No
Setback from the East Lot Line		Elevation of Floodplain	NA Feet
Setback to Septic Tank or Holding Tank	8 Feet	Setback to Well	50 Feet
Setback to Drain Field	20 Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.
For The Construction Of New One & Two Family Dwellings: ALL Municipalities Are Required To Enforce The Uniform Dwelling Code.
The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number: 259730	# of bedrooms: 2	Sanitary Date: 10-13-1995		
Permit Denied (Date):		Reason for Denial:				
Permit # 17-0097		Permit Date: 5-4-17				
Is Parcel a Sub-Standard Lot	<input type="checkbox"/> Yes (Deed of Record)	NA	Mitigation Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Required	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Parcel in Common Ownership	<input type="checkbox"/> Yes (Fused/Contiguous Lot(s))	NA	Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Affidavit Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Is Structure Non-Conforming	<input type="checkbox"/> Yes	NA	Previously Granted by Variance (B.O.A.)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #:	NA
Granted by Variance (B.O.A.)	Yes No	Case #:	NA	Case #:	NA	
Was Parcel Legally Created	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Was Property Surveyed	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No					
Inspection Record: Property well staked at time of inspection. Project location as represented by existing Appurtenant to identify a code-compliance location. OK to issue.						
Date of Inspection: 5/2/2017	Inspected by: Robert Schieman	Zoning District (R2)				
Condition(s): Town Committee or Board Conditions Attached? <input type="checkbox"/> Yes <input type="checkbox"/> No - (If No they need to be attached.)		Lakes Classification (-)				
Must Conform local Uniform Dwelling Code (UDC) inspector and Secure UDC building permit as required by state statute.						
Signature of Inspector: [Signature]		Date of Approval: 5/2/2017				
Hold For Sanitary: 5/2/2017	Hold For TBA: <input type="checkbox"/>	Hold For Affidavit: <input type="checkbox"/>	Hold For Fees: <input type="checkbox"/>	<input type="checkbox"/>		

OK Here/SLP
Staked out already

n, City, Village, State or Federal
Permits May Also Be Required

LAND USE – X
SANITARY – 259730 (10/13/1995)
SIGN –
SPECIAL –
CONDITIONAL –
BOA –

BAYFIELD COUNTY PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **17-0097** Issued To: **Paulette Ponick**

Part in

Location: **NW** $\frac{1}{4}$ of **NW** $\frac{1}{4}$ Section **24** Township **43** N. Range **8** W. Town of **Cable**

Gov't Lot	Lot	Block	Subdivision	CSM#
-----------	-----	-------	-------------	------

For: **Residential Use: [1- Story; Residence (29.5' x 26') = 767 sq. ft.; Attached Garage (44.6' x 26') = 1,157 sq. ft.]**
Total Overall = 1,924 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Must contact local Uniform Dwelling Code (UDC) inspector and secure UDC building permit as required by State Statute.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval.
This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.
This permit may be void or revoked if any performance conditions are not

completed or if any prohibitory conditions are violated.

Rob Schierman

Authorized Issuing Official

May 4, 2017

Date

SUBMIT: COMPLETED APPLICATION, TAX STATEMENT AND FEE TO:
Bayfield County
Planning and Zoning Depart.
PO Box 58
Washburn, WI 54891
(715) 373-6138

APPLICATION FOR PERMIT
BAYFIELD COUNTY, WISCONSIN
RECEIVED
APR 25 2017
Bayfield Co. Zoning Dept.

Permit #: 17-0099
Date: 5-4-17
Amount Paid: \$1,800.40
Refund:

INSTRUCTIONS: No permits will be issued until all fees are paid.
Checks are made payable to: Bayfield County Zoning Department.
DO NOT START CONSTRUCTION UNTIL ALL PERMITS HAVE BEEN ISSUED TO APPLICANT.

TYPE OF PERMIT REQUESTED: <input checked="" type="checkbox"/> LAND USE <input type="checkbox"/> SANITARY <input type="checkbox"/> PRIVY <input type="checkbox"/> CONDITIONAL USE <input type="checkbox"/> SPECIAL USE <input type="checkbox"/> B.O.A. <input type="checkbox"/> OTHER			
Owner's Name: TIM TULLY	Mailing Address: 47545 CHAPMAN RD	City/State/Zip: CABLE, WI 54821	Telephone:
Address of Property: 43555 BIG BROOK ROAD		City/State/Zip: CABLE, WI 54821	Cell Phone:
Contractor: HAAK BUILD LLC		Contractor Phone: 715-5584234	Plumber: DASMUS ARJ
Authorized Agent: (Person Signing Application on behalf of Owner(s))		Agent Phone:	Agent Mailing Address (include City/State/Zip):
PROJECT LOCATION: S1/2 NE1/4, 1/4	Legal Description: (Use Tax Statement)	Tax ID# (4-5 digits): 9430	Recorded Deed (i.e. # assigned by Register of Deeds) Document #: 1160 R-401
Section 14, Township 4-3 N, Range 08 W	Town of: CABLE	Lot Size:	Acres: 42.0
<input checked="" type="checkbox"/> Shoreland <input type="checkbox"/> Non-Shoreland	<input checked="" type="checkbox"/> Is Property/Land within 300 feet of River, Stream (incl. intermittent) Creek or Landward side of Floodplain? <input type="checkbox"/> If yes---continue <input checked="" type="checkbox"/> Is Property/Land within 1000 feet of Lake, Pond or Flowage <input type="checkbox"/> If yes---continue	Distance Structure is from Shoreline: 250 feet	Distance Structure is from Shoreline: feet
<input type="checkbox"/> Is Property in Floodplain Zone? <input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Are Wetlands Present? <input type="checkbox"/> Yes <input type="checkbox"/> No		

Value at Time of Completion * include donated time & material	Project	# of Stories and/or basement	Use	# of bedrooms	What Type of Sewer/Sanitary System is on the property?	Water
\$400,000	<input checked="" type="checkbox"/> New Construction <input type="checkbox"/> Addition/Alteration <input type="checkbox"/> Conversion <input type="checkbox"/> Relocate (existing bldg) <input type="checkbox"/> Run a Business on Property	<input checked="" type="checkbox"/> 1-Story <input type="checkbox"/> 1-Story + Loft <input type="checkbox"/> 2-Story <input type="checkbox"/> Basement <input type="checkbox"/> No Basement <input type="checkbox"/> Foundation	<input type="checkbox"/> Seasonal <input checked="" type="checkbox"/> Year Round <input type="checkbox"/> 3 Months	<input type="checkbox"/> 1 <input checked="" type="checkbox"/> 2 <input checked="" type="checkbox"/> 3	<input type="checkbox"/> Municipal/City <input checked="" type="checkbox"/> (New) Sanitary <input type="checkbox"/> Sanitary (Exists) <input type="checkbox"/> Privy (Pit) or Vaulted (min 200 gallon) <input type="checkbox"/> Portable (w/service contract) <input type="checkbox"/> Compost Toilet <input type="checkbox"/> None	<input type="checkbox"/> City <input checked="" type="checkbox"/> Well

Existing Structure: (if permit being applied for is relevant to it)	Length: 50' 4" 56'	Width: 24' 1" 20'	Height: 24'
Proposed Construction:			

Proposed Use	Proposed Structure	Dimensions	Square Footage
<input type="checkbox"/> Residential Use	<input type="checkbox"/> Principal Structure (first structure on property)	() X)	
<input type="checkbox"/> Commercial Use	<input type="checkbox"/> Residence (i.e. cabin, hunting shack, etc.)	() X)	
<input type="checkbox"/> Municipal Use	<input type="checkbox"/> with Loft	() X)	
	<input type="checkbox"/> with a Porch	() X)	
	<input type="checkbox"/> with (2nd) Porch	() X)	
	<input type="checkbox"/> with a Deck	() X)	
	<input type="checkbox"/> with (2nd) Deck	(24' X 50') 1200 sq ft	
	<input type="checkbox"/> Bunkhouse w/ () sanitary, or () sleeping quarters, or () cooking & food prep facilities	() X)	
	<input type="checkbox"/> Mobile Home (manufactured date)	() X)	
	<input type="checkbox"/> Addition/Alteration (specify)	() X)	
	<input type="checkbox"/> Accessory Building (specify)	() X)	
	<input type="checkbox"/> Accessory Building Addition/Alteration (specify)	() X)	
	<input type="checkbox"/> Special Use: (explain)	() X)	
	<input type="checkbox"/> Conditional Use: (explain)	() X)	
	<input type="checkbox"/> Other: (explain)	() X)	

FAILURE TO OBTAIN A PERMIT OF STARTING CONSTRUCTION WITHOUT A PERMIT WILL RESULT IN PENALTIES
I (we) acknowledge that I (we) am (are) providing and that it will be relied upon by Bayfield County in determining whether to issue a permit. I (we) further accept liability which may be a result of Bayfield County relying on this information. I (we) am (are) providing in or with this application. I (we) consent to county officials charged with administering county ordinances to have access to the above described property at any reasonable time for the purpose of inspection.

Owner(s): Tim Tully
(if there are Multiple Owners listed on the Deed All Owners must sign or letter(s) of authorization must accompany this application)

Authorized Agent: Marlene Drell Date 4-25-2017

(if you are signing on behalf of the owner(s) a letter of authorization must accompany this application)

Address to send permit Bayfield County Zoning Department Attach Copy of Tax Statement

APPLICANT - PLEASE COMPLETE PLOT PLAN ON REVERSE SIDE

boxed below: Draw or Sketch your Property (regardless of what you are applying for)

- (1) Show Location of: Proposed Construction ✓
(2) Show / Indicate: North (N) on Plot Plan ✓
(3) Show Location of (*): (*) Driveway and (*) Frontage Road (Name Frontage Road) ✓
(4) Show: All Existing Structures on your Property ✓
(5) Show: (*) Well (W); (*) Septic Tank (ST); (*) Drain Field (DF); (*) Holding Tank (HT) and/or (*) Privy (P) ✓
(6) Show any (*): (*) Lake; (*) River; (*) Stream/Creek; or (*) Pond ✓
(7) Show any (*): (*) Wetlands; or (*) Slopes over 20% ✓

SEE SITE PLAN C1

Please complete (1) – (7) above (prior to continuing)

Changes in plans must be approved by the Planning & Zoning Dept.

(8) Setbacks: (measured to the closest point)

Description	Measurement	Description	Measurement
Setback from the Centerline of Platted Road	<u>403</u> Feet	Setback from the Lake (ordinary high-water mark)	Feet
Setback from the Established Right-of-Way	<u>373</u> Feet	Setback from the River, Stream, Creek	<u>250</u> Feet
Setback from the North Lot Line	<u>1132</u> Feet	Setback from the Bank or Bluff	Feet
Setback from the South Lot Line	<u>150</u> Feet	Setback from Wetland	Feet
Setback from the West Lot Line	<u>1105</u> Feet	20% Slope Area on property	<input type="checkbox"/> Yes <input type="checkbox"/> No
Setback from the East Lot Line	<u>403</u> Feet	Elevation of Floodplain	Feet
Setback to Septic Tank or Holding Tank	<u>20</u> Feet	Setback to Well	<u>10</u> Feet
Setback to Drain Field	Feet		
Setback to Privy (Portable, Composting)	Feet		

Prior to the placement or construction of a structure within ten (10) feet of the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner or marked by a licensed surveyor at the owner's expense.

Prior to the placement or construction of a structure more than ten (10) feet but less than thirty (30) feet from the minimum required setback, the boundary line from which the setback must be measured must be visible from one previously surveyed corner to the other previously surveyed corner, or verifiable by the Department by use of a corrected compass from a known corner within 500 feet of the proposed site of the structure, or must be marked by a licensed surveyor at the owner's expense.

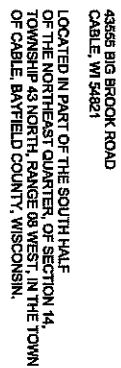
(9) Stake or Mark Proposed Location(s) of New Construction, Septic Tank (ST), Drain field (DF), Holding Tank (HT), Privy (P), and Well (W).

NOTICE: All Land Use Permits Expire One (1) Year from the Date of Issuance if Construction or Use has not begun.

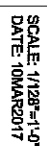
For The Construction Of New One & Two Family Dwellings: All Municipalities Are Required To Enforce The Uniform Dwelling Code.

The local Town, Village, City, State or Federal agencies may also require permits.

Issuance Information (County Use Only)		Sanitary Number: <u>17-185</u>	# of bedrooms: _____	Sanitary Date: <u>5-4-17</u>
Permit Denied (Date): _____		Reason for Denial: _____		
Permit #: <u>17-0099</u>	Permit Date: <u>5-4-17</u>			
Is Parcel a Sub-Standard Lot Is Parcel in Common Ownership Is Structure Non-Conforming	<input type="checkbox"/> Yes (Deed of Record) <input type="checkbox"/> Yes (Fused/Contiguous Lot(s)) <input type="checkbox"/> Yes _____	<input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No	Mitigation Required Mitigation Attached	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input checked="" type="checkbox"/> No
Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Case #: <u>NA</u>	Previously Granted by Variance (B.O.A.) <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		Case #: <u>NA</u>
Was Parcel Legally Created Was Proposed Building Site Delineated	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Were Property Lines Represented by Owner Was Property Surveyed		<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Inspection Record: <u>Project location well marked with stakes & flags. Project location as indicated by owner/agent appears to identify & code compliant location. OK to issue LO permit</u>				
Date of Inspection: <u>5/2/2017</u>	Inspected by: <u>Robert Schirmer</u>			
Condition(s): <u>Town, Committee or Board Conditions Attached? Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> (If No they need to be attached.)</u> <u>Must Contact Local Uniform Dwelling Code (UDC) Inspection agency and Secure a UDC Building permit prior to start of construction as required by State Statute.</u>				
Signature of Inspector: <u>[Signature]</u>		Date of Approval: <u>5/2/2017</u>		
Hold For Sanitary: <input type="checkbox"/> _____	Hold For TBA: <input type="checkbox"/> _____	Hold For Affidavit: <input type="checkbox"/> _____	Hold For Fees: <input type="checkbox"/> _____	<input type="checkbox"/> _____



permanDESIGN
13444 Hollywood Ln.
Hayward, Wisconsin
715.634.1076
perman@holmes.com



City, Village, State or Federal
Permits May Also Be Required

LAND USE – X
SANITARY – 17-18S
SIGN –
SPECIAL – Class A
CONDITIONAL –
BOA –

BAYFIELD COUNTY

PERMIT

WEATHERIZE AND POST THIS PERMIT
ON THE PREMISES DURING CONSTRUCTION

No. **17-0099** Issued To: **Tully Enterprises**

S ½
Location: **NE** ¼ of - ¼ Section **14** Township **43** N. Range **8** W. Town of **Cable**
W of Tn Rd

Gov't Lot	Lot	Block	Subdivision	CSM#
-----------	-----	-------	-------------	------

For: **Residential Use: [1.5- Story; Residence (24' x 50') = 1,200 sq. ft.; Attached Garage (20' x 56') = 1,120 sq. ft.]**
Total Overall = 2,320 sq. ft.

(Disclaimer): Any future expansions or development would require additional permitting.

Condition(s): Must contact local uniform dwelling code (UDC) inspection agency and secure a UDC building permit prior to start of construction as required by State Statute.

NOTE: This permit expires one year from date of issuance if the authorized construction work or land use has not begun.

Changes in plans or specifications shall not be made without obtaining approval.
This permit may be void or revoked if any of the application information is found to have been misrepresented, erroneous, or incomplete.
This permit may be void or revoked if any performance conditions are not completed or if any prohibitory conditions are violated.

Rob Schierman

Authorized Issuing Official

May 4, 2017

Date